

**Application Data Sheet**

**Application Information**



Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R? None  
Title:: Systems and Methods for Synthesizing Speech  
Using Discourse Function Level Prosodic  
Features  
Attorney Docket Number:: FX/A3007Q - 317003  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 8  
Small Entity:: No  
Petition included?:: No  
Secrecy Order in Parent Appl.?::

**Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country: US  
Status:: Full Capacity  
Given Name:: Misty  
Middle Name::  
Family Name:: AZARA  
City of Residence:: Seattle  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 700 E. Denny Way #604  
City of mailing address:: Seattle  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98122

Applicant Authority type:: Inventor  
Primary Citizenship Country: US  
Status:: Full Capacity  
Given Name:: Livia  
Middle Name::  
Family Name:: POLANYI  
City of Residence:: Palo Alto  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 4037 Villa Vista  
City of mailing address:: Palo Alto  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94306

Applicant Authority type:: Inventor  
Primary Citizenship Country: ITALY

Status:: Full Capacity  
Given Name:: Giovanni  
Middle Name:: L.  
Family Name:: THIONE  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 4533 18<sup>th</sup> Street #2  
City of mailing address:: San Francisco  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94114

Applicant Authority type:: Inventor  
Primary Citizenship Country: NETHERLANDS  
Status:: Full Capacity  
Given Name:: Martin  
Middle Name:: H

Family Name:: VAN DEN BERG  
City of Residence:: Palo Alto  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 4037 Villa Vista  
City of mailing address:: Palo Alto  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94306

#### **Correspondence Information**

Correspondence Customer Number:: 31011

**Representative Information**

Representative Customer Number:: 31011

**Domestic Priority Information**

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part	10/781,443	02/18/2004

**Assignee Information**

Assignee Name:: FUJI XEROX CO., LTD.



**Application Data Sheet**

**Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R? None  
Title:: Systems and Methods for Synthesizing Speech  
Using Discourse Function Level Prosodic  
Features  
Attorney Docket Number:: FX/A3007Q - 317003  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 8  
Small Entity:: No  
Petition included?:: No  
Secrecy Order in Parent Appl.?::

**Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country: US  
Status:: Full Capacity  
Given Name:: Misty  
Middle Name::  
Family Name:: AZARA  
City of Residence:: Seattle  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 700 E. Denny Way #604  
City of mailing address:: Seattle  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98122

Applicant Authority type:: Inventor  
Primary Citizenship Country: US  
Status:: Full Capacity  
Given Name:: Livia  
Middle Name::  
Family Name:: POLANYI  
City of Residence:: Palo Alto  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 4037 Villa Vista  
City of mailing address:: Palo Alto  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94306

Applicant Authority type:: Inventor  
Primary Citizenship Country: ITALY

Status:: Full Capacity  
Given Name:: Giovanni  
Middle Name:: L.  
Family Name:: THIONE  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 4533 18<sup>th</sup> Street #2  
City of mailing address:: San Francisco  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94114

Applicant Authority type:: Inventor  
Primary Citizenship Country: NETHERLANDS  
Status:: Full Capacity  
Given Name:: Martin  
Middle Name:: H

Family Name:: VAN DEN BERG  
City of Residence:: Palo Alto  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 4037 Villa Vista  
City of mailing address:: Palo Alto  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94306

### **Correspondence Information**

**Correspondence Customer Number::** 31011

**Representative Information**

Representative Customer Number:: 31011

**Domestic Priority Information**

<u>Application::</u>	<u>Continuity Type:</u>	<u>Parent Application::</u>	<u>Parent Filing Date::</u>
<u>This Application</u>	<u>Continuation-in-part</u>	<u>10/781,443</u>	<u>02/18/2004</u>

**Assignee Information**

Assignee Name:: FUJI XEROX CO., LTD.





**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No. : 10/785,199  
Applicants : Misty AZARA et al.  
Filed : February 25, 2004  
TC/A.U. : UNKNOWN  
Examiner : UNKNOWN  
Docket No. : FX/A3007Q-317003  
Customer No.: 31011

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**SUPPLEMENTAL APPLICATION DATA SHEET SUBMISSION**

Sir:

Applicants submit a Supplemental Application Data Sheet for the above-identified application. A marked up copy of the Supplemental Application Data Sheet that indicates the requested changes with underlining and strikethrough is also attached.

Respectfully submitted,

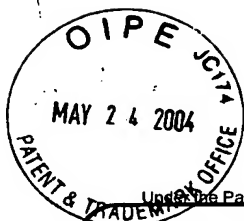
Christian Austin-Hollands  
Reg. No. 46,527

Date: MAY 24, 2004

**CHRISTIAN AUSTIN-HOLLANDS**  
**P.O. Box 170325**  
**San Francisco, CA 94117**  
**Telephone: (415) 762.9543**

**DEPOSIT ACCOUNT USE  
AUTHORIZATION**

Please grant any extension  
necessary for entry;  
Charge any fee due to  
Deposit Account No. 50-3023



IFW

PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

10

Application Number	10/785,199
Filing Date	February 25, 2004
First Named Inventor	Misty AZARA et al.
Art Unit	UNKNOWN
Examiner Name	UNKNOWN
Attorney Docket Number	FX/A3007Q-317003

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): 1 Suppl. Appl. Data Sheet Submission; 1 Suppl. Data Sheet; and 1 marked up copy
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Christian Austin-Hollands (Reg. No. 46,527) Customer Number 31011 Tel. 415.762.9543
Signature	
Date	May 24, 2004

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name			
Signature		Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.